

Thursday, October 26, 2023

5:30 PM

Assembly Chambers

Join Zoom Meeting https://us06web.zoom.us/j/86207308959?pwd=a1IPTXhwd2pXVIIONE5FTIBpSmhJdz09 Meeting ID: 862 0730 8959 Passcode: 433699

- 1. Call to Order
- 2. Approval of the Agenda

3. Approval of Board Minutes

A. Approval of minutes for the September 28, 2023, board meeting.

4. Visitor Comments

- A. Communications received
- 5. Board Member Comments

6. Committee Reports

- A. Resource Committee
- B. LTC Committee
- C. Community Engagement Committee

7. Reports

- A. Chief of Staff Dr. Hulebak provided a written report.
- B. Clinic
 K. Zweifel provided a written report.
- Community Wellness
 J. Walker provided a written report.

- Dietary
 J. Ely provided a written report.
- E. Home HealthK. Testoni provided a written report.
- F. Quality & Infection Prevention
 S. Romine/J. Bryner provided a written report.
- **G.** Executive Summary P. Hofstetter provided a written report.
- Financial
 J. McCormick provided a written report.

8. Old Business

9. New Business

- A. PMC Youth Programs Kinder Skog Update PMC staff will provide an update.
- B. New Facility Update Jay Farmwald, PMC project manager, will provide an update.
- **C.** Treasury CCPF Grant

Background: The Department of the Treasury has approved a \$20 million grant to the State of Alaska for the Wellness, Education & Resource Center (WERC) portion of the new medical center project. The State will issue a \$20M subaward to PMC, all of which must be used in support of the planning, design, construction and fit-out of the WERC building.

Action Required: Execute Award and Authorization To Expend Funds

By motion, the Petersburg Medical Center Board of Directors authorizes the CEO to finalize the CCPF grant agreement with the State, and expend these funds for the planning, design, construction and fit-out of the Wellness, Education & Resource Center building.

10. Executive Session

A. Executive Session

By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments.

11. Next Meeting

12. Adjournment





Thursday, September 28, 2023

5:30 PM

Assembly Chambers

1. Call to Order

2. Approval of the Agenda

The agenda was approved.

Motion made by Lagoudakis, Seconded by Simbahon.

Voting Yea: Cook, Cushing, Stratman, Lagoudakis, Simbahon.

3. Approval of Board Minutes

The August 24, 2023 board meeting minutes were approved.

Motion made by Stratman. Seconded by Simbahon.

Voting Yea: Cook, Cushing, Stratman, Lagoudakis, Simbahon.

4. Visitor Comments

Julie Walker: PMC employee and parent of a Kinder Skog child, commented on Kinder Skog and expressed gratitude to the PMC board for taking on childcare. She emphasized how it meets the PMC mission and community needs and demonstrates commitment to the community. She thanked the board for their time and commitment in serving the community.

Molly Tiber, parent of a Kinder Skog child, thanked PMC for housing Kinder Skog and is grateful for the part it plays in community wellness for the town. She expressed that the program makes it possible for parents to take and maintain a job and is invaluable to parents. She thanked the board for seeing this community need and encouraged the ongoing partnership. She shared that her daughter looks forward to one day working for Kinder Skog once she is old enough.

Brian Smith, secretary for the Kinder Skog advisiory committee and parent of a Kinder Skog child, voiced his support for the program and its home at PMC. He expressed that Kinder Skog is a valuable program that serves kids, parents and the community. He

shared and reminded the board that the Kinder Skog advisory committee is a great resource for both PMC and Kinder Skog leadership.

Katie Holmlund, PMC leader of youth programs and Kinder Skog, thanked the PMC board for their support of KS. She shared that the program has grown substantially in capacity through the needed support from PMC, and PMC is being viewed as leaders in the state for doing this. Others across the state have reached out for guidance on replicating the program at their health care facilities.

5. Board Member Comments

Member Lagoudakis attended the AHHA Conference. They learned a lot of new things, including about behavioral health. We were approached by other entities about the Kinder Skog program. We also learned about challenges other hospitals are having with recruiting and other issues. Thank you to PMC for inviting us board members along.

6. Committee Reports

A. Resource Committee

Member Cook provided an overview of this month's Resource Committee meeting, which provided detailed financial reporting, including that financials were up for August.

B. CAH Committee

A meeting was held this month.

C. LTC Committee

Member Cushing attended this month's LTC quality meeting. She shared that there is an area of concern regarding specialized equipment that is needed for a couple of residents. The equipment does not fit through doorways and other areas of LTC and points to inadequacy of current space for LTC. Additionally, the issue with mold in the solarium has closed it off to use and is hard for residents. On a positive note, LTC residents are ready again for visitors and people are encouraged to volunteer. Whether it is playing music, having conversations or contributing in others ways, the help is welcome and people can reach out to the hospital. The residents love seeing children and are looking forward to Halloween.

7. Reports

A. Pharmacy

E. Kubo provided a written report, provided an overview and was available to answer questions.

- B. Rehab DepartmentK. DuRoss provided a written report.
- C. Plant Maintenance W. Brooks provided a written report. P. Hofstetter thanked Mike Boggs for his years of

service. In response to board member's question, PMC is still working to assess and mitigate the mold issue in the solarium.

- D. Environmental Services G. Edfelt provided a written report.
- E. Activities

A. Neidiffer provided a written report. She provided a few highlights from the report and was available to answer questions. She addressed that the impact of the solarium closure has been very hard for residents. They have a Halloween event coming up and the residents are really hoping to see more kids.

F. Quality & Infection Prevention

S. Romine / J. Bryner provided a written report. J. Bryner and P. Hofstetter were available to answer questions and provided a few highlights. P. Hofstetter that the board committee comments for CAH and LTC all relate to the quality meetings and what is covered at those meetings. J. Bryner shared that it is unknown when the new Covid vaccines will be available. Once the vaccines become available, people can get them at either Public Health or at the clinic as part of regular immunizations. Flu vaccines are now available at both locations.

G. Executive Summary

P. Hofstetter provided a written report and provided a few highlights and updates. He shared new information as follows:

- Replacement facility:
 - PMC has a verbal green light on the \$20 million Treasury funding based on what State OMB shared at a meeting earlier today. Provided that final paperwork and approvals are obtained, PMC will be able to move forward with the WERC building.
 - A second open house on the replacement facility is being planned for later in November.
 - Adding MRI as a service line is part of the WERC building design, and design and space planning continues.
- AHHA Annual Conference
 - P. Hofstetter thanked Members Cook and Lagoudakis, and staff member Jennifer Bryner, for attending the annual AHHA conference.
 - At the conference, J. Bryner spoke on a panel related to workforce and retention, including Kinder Skog and the importance of childcare.
 - Other hospitals approached PMC and asked them to share how they can implement similar programs, including Heidi Hedberg with Alaska Dept. of Health & Social Services.
 - Training availability and BetterHelp services for staff also really help with staff retention.
 - PMC attendees learned important details related to new CMS regulations specific to LTC. Much of it relates to residents having more physical space, single occupancy rooms and square footage space. These changes are currently out for public comment. If these are implemented, this will be challenging to accommodate in the current facility.
 - PMC LTC won an award for Quality Excellence.

• A second colonoscopy clinic is being planned for January.

H. Financial

J. McCormick provided a written report and reviewed the highlights. He expects to see continued improvements into the fall and winter. He thanked the clinicians for their diligence in capturing appropriate charges. PMC is working to get some credit balances and refunds to some in the community.

8. Old Business

9. New Business

Member Cushing commented that she would like the community engagement committee to meet soon. This committee consists of Members Cushing, Cook and Simbahon. Member Cushing will reach out to schedule, and would like to have a couple of PMC staff members involved.

10. Executive Session

By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments, legal matters, and to discuss matters the immediate knowledge of which would clearly have an adverse effect upon the finances of the hospital.

Member Simbahon motioned for the Board to enter into Executive Session to consider medical staff appointments/reappointments, legal matters, and to discuss matters the immediate knowledge of which would clearly have an adverse effect upon the finances of the hospital. Motion seconded by Member Stratman. Motion passed unanimously. Board entered Executive Session at 6:26 pm.

Board came out of Executive Session 6:35 pm.

Member Simbahon made a motion to appoint/reappoint to the medical staff: Lloyd Wilson., MD; Erik Hulebak, PA; Alice Hulebak, MD; Alexander Dabrowiecki, MD; Cameron French – PA, Dermatology; Ann Nora Ehret, DO

Motion seconded by Member Stratman. Motion passed unanimously.

11. Next Meeting

The next regularly scheduled meeting was set for Thursday, October 26 at 5:30 pm.

12. Adjournment

The meeting adjourned at 6:46 pm.

Motion made by Simbahon, Seconded by Lagoudakis.

Voting Yea: Cook, Cushing, Stratman, Lagoudakis, Simbahon.

September 24, 2023

Dear Petersburg Medical Center Board Members,

The Mission of Petersburg Medical Center is "Excellence in healthcare services and the promotion of wellness in our community". Childcare is a vital resource for Petersburg as a community. Kinderskog is the most incredible after school program for kids. They learn such things as resilience, socializing, crafts, safety, moving their bodies and being creative outdoors, and serving the community picking up trash and filling HIP bags. It is a place where kids can be kids and use their imaginations and energy positively. By supporting the Kinderskog program Petersburg Medical Center is supporting the community and its working members while providing a thriving program for the kids in it. Not only does the program provide after school hours, it also provides working families childcare during the summer. There are always exciting activities planned for the kids such as backyard games, lantern walks, cranberry picking, muskeg hole jumping, fort building, and educational science programs. My son is in his fifth year of Kinderskog and loves it. Knowing that he is enjoying his time at Kinderskog with positive role models allows me to work at the hospital without worrying about him. Please consider what a community resource the Kinderskog program is and how important it is for it to be supported.

Thank you for your time,

manie, nil

Mamie Nilsen

Karen Leatherman

From: Sent: To: Subject: Philip Hofstetter Thursday, September 28, 2023 4:01 PM Karen Leatherman FW: letter for your meeting

From: Kinder Skog <kinderskog@PMC-HEALTH.ORG>
Sent: Thursday, September 28, 2023 3:59 PM
To: Jcook2@pmcak.org
Cc: Philip Hofstetter <phofstetter@PMC-HEALTH.ORG>
Subject: Fw: letter for your meeting

Forwarding this letter I received to the board.

Happy Adventuring!

Katie Holmlund Kinder Skog Administrator PMC Youth Program Coordinator

From: Stephanie Pawuk <<u>spawuk@pcsd.us</u>> Sent: Thursday, September 28, 2023 3:51:45 PM To: Kinder Skog; Noah Pawuk Subject: letter for your meeting

External Email - Caution, DO NOT click on unexpected, suspicious attachments or links. Report all suspicious activity to the IT department.

Hi Katie,

Noah was too swamped with homework to write something up but he gave me the ok to write a little bit from my perspective about his time working at Kinderskog.

Dear PMC board,

I'm writing in support of keeping the ties between Kinderskog and PMC.

Last spring my son Noah was hired to work at Kinderskog as a mentor. Noah is only 15 years old but he is very mature and has lots of experience working with kids from helping his dad coach Parks and Rec basketball. We were delighted to have Kinderskog as an option for him for work last summer. He did a little gillnetting with his uncle as well but fish prices were poor this year and it was so great for him to have consistent income. He has put every penny of it into college savings. I appreciate PMC's ties to Kinderskog because it means they can pay their hardworking employees a fair wage. It's important for our teenagers to have good job opportunities in town. In addition, he has learned so many valuable lessons working there. Kinderskog kids all around town are excited to see Noah and he has loved working with the youth of our community since his very first day. Thank you so much for your time. Sincerely,

Stephanie Pawuk

spawuk@pcsd.us



Chief of Staff Report October 2023

Workforce Wellness

Dr. Alice Hulebak is now a designated Aviation Medical Examiner for the FAA which allows pilots to schedule appointments locally for their class 2 and 3 medical exams. Dr. Burt has become a certified Medical Review Officer for workplace drug testing.

Dr. Hess, Dr. Hulebak and Jennifer Bryner attended a CALS course in Anchorage October 13-15. CALS stands for Comprehensive Advanced Life Support and is a course designed to provide additional education to rural and/or resource limited healthcare professionals working in the emergency setting. It was a wonderful course with hands-on training. We hope that the remainder of the medical staff and additional nursing staff will be able to attend this course in the future.

We have broadened our visiting specialty providers. We welcomed general surgeon Dr. Garrison and Kelly Gebler CRNA to Petersburg at the end of September. Dr. Garrison performed colonoscopies as well as upper endoscopies and plans to return in January. Cameron French, PA-C will be here from Idaho providing dermatology consultation/services October 23-25 and the plan is for him to return at regular intervals. A contract was signed with Dr. Tarim, a psychiatrist, who will soon be able to provide consultations on our patients including our long term care residents. We continue to have otolaryngology (Dr. Raster) and optometry (Dr. Kapp) at regular intervals.

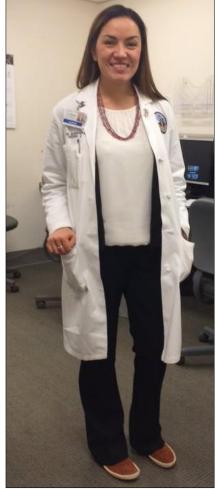
Dr. Hyer's last day was 8/31/2023. We are actively recruiting to fill her fulltime position. Dr. Hess and Dr. Hulebak visited the Alaska Family Medicine Residency Program in Anchorage (while there for CALS) as part of the recruitment process. In the interim we are using, and looking for, locum providers. Dr. Ehret, a doctor who previously worked in Dutch Harbor, was here in October. Dr. Tuccillo will fill some emergency room shifts while we continue to recruit.

Community Engagement

Our providers continue to be actively involved in teaching. Erik Hulebak had a PA student for 4 months. This student graduated in August and accepted a job in Dutch Harbor. Dr. Hess and Dr. Hulebak continue to teach UW School of Medicine 3rd year medical students. Dr. Hess recently attended the UW Family Medicine Clerkship quarterly meeting which encompasses clinical preceptors (doctors) from the WWAMI (Washington, Wyoming, Alaska, Montana and Idaho) region.

Patient Centered Care

The providers continue to work in collaboration with our patients' subspecialists including oncology, rheumatology and gastroenterology to provide specialized outpatient treatments here at PMC. These therapies



Dr. Garrison from Mt Edgecumbe Medical Center

include chemotherapy and monoclonal antibody infusions which are usually only administered at an infusion center. Our patients (and some from Wrangell) are pleased they do not have to travel for these repeated treatments.

Facility

Dr. Hess is serving on the steering committee for the new facility and provides input on behalf of the medical staff.

Financial Wellness

The providers are working with the financial office to develop a workflow for transitional care management and chronic care management. We want to ensure that we are meeting the specific documentation requirements determined by CMS. Our hope is to better capture charges for work that we are already doing.

Submitted by: Alice Hulebak, MD



Joy Janssen Clinic Report October 2023

Workforce Wellness

The Joy Janssen Clinic has effectively maintained staffing stability over the past six months, resulting in the achievement of a one-to-one ratio of medical assistants to medical staff providers. This accomplishment addresses the shortfall identified in our prior report. Several of our clinic staff members are either currently or previously enrolled in the Clinical Medical Assistance Apprenticeship program with the Alaska Primary Care Association, enabling them to progress towards becoming Certified Medical Assistants. Furthermore, we have undertaken cross-training for certain medical assistants, allowing them to acquire additional skills in managing the clinic reception area. This is particularly beneficial when we face staffing shortages in that area.

Community Engagement

The clinic has engaged with the community through outreach events and has also joined hands with others to contribute to collective initiatives, the details of which are outlined below:

- 1. On June 1, 2023, the Clinic Manager engaged in a live radio session on KFSK, where updates were provided regarding the upcoming Specialties including Dermatology with Cameron French, PA-C scheduled for Oct 23-25, 2023, Optometry with Dr. Kapp in July and Sep 2023, and ENT with Dr. Raster in Sep 2023.
- 2. The clinic continues to work with a variety of departments for collaboration. Clinic Case Management and Home Health are working together on implementation of a Patient Home Monitoring program called HealthSnap for patients with chronic diseases like diabetes, heart disease, and COPD.
- 3. The clinic and PMC have initiated a Hypertension Quality Project with the aim of enhancing blood pressure readings for our patients. This endeavor involves a collaborative effort across various departments and actively involves community members.

Through these community outreach efforts, the clinic demonstrates its commitment to engaging with the community, promoting health education, and exploring collaborative initiatives with other departments.

Patient Centered Care

The clinic's primary commitment revolves around the consistent delivery of patient-centered care. We actively engage in collaborative efforts with various departments to ensure that patients enjoy a positive experience throughout their medical treatment at our facility. Several examples of initiatives that embody this patient-centered approach include:

- 1. **Meeting Patients Where They Are:** At the heart of our primary care philosophy is the concept of meeting patients at their specific needs. We provide services that are tailored to individual patient requirements, offering them comprehensive support and guidance throughout their healthcare journey.
- 2. Chronic Care Management: To assist patients in navigating the healthcare system and establishing strong connections with their healthcare team, we have a dedicated case manager. They provide invaluable support in complex medical situations and conduct monthly follow-ups, ensuring that patients receive continuous care and attention.
- 3. **Transitional Care Management:** We have established a coordinated effort between our acute care and primary care teams to ensure that patients receive necessary follow-up care following their hospital discharge. This continuous transition is aimed at enhancing the overall patient experience/

- 4. **Remote Home Monitoring:** Health Snap is now available to patients, allowing them to enroll in home monitoring programs that include devices such as blood pressure machines, scales, blood glucose monitors, and pulse oximeters. Patients using these monitoring devices can conveniently log their health information into a portal, which our healthcare providers at PMC can access and monitor.
- 5. **Referrals:** In the past year (from September 2022 to 2023), PMC processed a total of 2,834 referrals, encompassing both internal and external referrals. Internal referrals cover a range of specialties, including audiology, nutrition, rehabilitation and therapies, home health, wound care, and behavioral health. External referrals extend to specialists located outside of Petersburg, ensuring that our patients have access to a comprehensive network of healthcare expertise.

Facility

The Joy Janssen Clinic team, comprising of the Clinic Manager, Assistant Manager, Medical Director, Medical Assistants, and Reception Supervisor, are actively participating in the planning of our new facility. We regularly attend meetings to offer input regarding the design and operational flow of the clinic.

Financial Wellness

The clinic is actively pursuing strategies to boost patient volume and optimize provider schedules in order to enhance the clinic's revenue from the services provided. These strategies include the implementation of innovative scheduling techniques, proactive patient bookings on on-call days, and outreach efforts to ensure the timely delivery of overdue preventive care. Additionally, the clinic's management and registration staff are diligently addressing work queues, which involve reviewing accounts to identify and rectify any issues or errors in the registration process that could potentially result in delayed reimbursements or claim denials.

Furthermore, the clinic is making concerted efforts to secure increased reimbursements for care management services, specifically Chronic Care Management and Transitional Care Management. These programs were initiated in September and October.

In addition to these initiatives, the clinic has also collaborated with the Wellness department to seek State and Federal grants to fund various services and projects. Notably, PMC was awarded the State of Alaska Tobacco Prevention & Control Grant, which offers the potential for an annual sum of \$140,000 for three years. The primary goal of this grant is to improve tobacco-related patient health outcomes by enhancing healthcare services and increasing access to evidence-based cessation support.

Submitted by: Kelly K. Zweifel, Clinic Director



Community Wellness Report October 2023

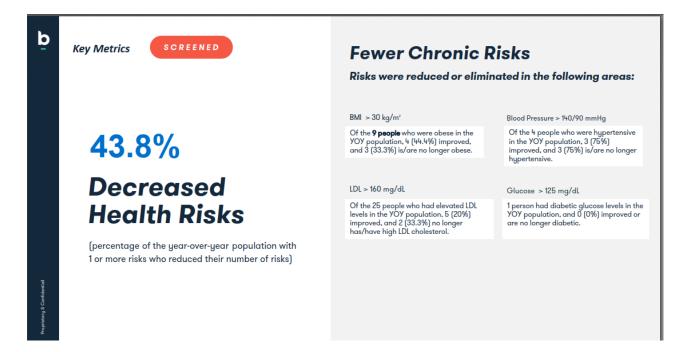
Workforce Wellness

The Community Wellness Department continues to have consistent core staffing.

<u>PMC's Youth Programs</u> doubled its capacity this summer and offered some full day programming, which required additional seasonal staffing. PMC worked with HR and to obtain work permits for Kinder Skog Mentor positions, allowing us to lower the minimum age requirement to 15 years old. Six seasonal staff members were hired, three of whom were high school students. Four of them have remained on staff as PRN status and are available to sub when staffing coverage is needed. This has added to the program stability, allowed for increased program capacity and created a new avenue for building the future workforce of PMC. Several of the seasonal staff plan to return next summer. PMC's Youth Programs are serving PMC staff as well as the community – over 40% of the summer ORCA camp and PODs camp participants were PMC dependents. Currently 33% of enrolled Kinder Skog participants are dependents of PMC employees, up from 27% in Fall 2022.

<u>PMC's Employee Wellness Program</u> continues to support staff health, wellness, morale and retention in a variety of ways. *Betterhelp* (online behavioral health therapy) continues to be a well utilized resource for staff and receives good reviews. The *Bravo Wellness Incentive Program* provides monetary incentives to eligible staff and spouses for meeting program requirements such as biometric screenings, health coaching programs, cancer screenings and for achieving set health metrics such as blood pressure and cholesterol. Some results are:

- 45% of eligible staff and spouses participated in 2023 Bravo Wellness Incentive Program
- Of the 35 participants that participated in both 2022 and 2023, 43.8% decreased health risks (see chart below for details)
- Hypertension is the most common risk factor among PMC staff



Community Engagement

Partnerships:

Developing and maintaining strong relationships with community partners and other PMC departments is a key area of focus for our team. Some examples include:

- <u>Schools:</u> In September, Community Wellness Specialist partnered with PMC Behavioral Health clinician to implement *Signs of Suicide (SOS) presentations* in the high school (~60 students) and Mental Health Awareness Week outreach tables at the middle and high school (~120 student and staff *interactions*). PMC's Youth Programs Coordinator also coordinated the annual *Walk/Bike to School Day* in partnership with Stedman Elementary's Partners in Education group (~100 participants).
- <u>SHARE Coalition</u>: PMC has been a part of the local SHARE Coalition (Supporting Health Advocacy Resiliency Education) since its inception in 2006. The coalition focuses on prevention and promotion of health and wellness in the community including mental health, youth and adults, physical health, basic needs, ect. Leadership of the coalition has transitioned among partner agencies throughout the years and is currently being held by PMC's Community Wellness Department. Community partners include WAVE, PVFD, HiP, Public Health, Petersburg School District, PIA and more. SHARE meets the last Thursday of the month from 12:00-1:00 in the Dorothy Ingle Conference Room and is open to the community (lunch is provided).

Youth Programs:

Kinder Skog and PMC's other youth programs significantly expanded this summer and served over 60% of the elementary school population during the summer (see attached PMC Youth Programs report). The PMC Youth Program Coordinator participates in advocacy and education opportunities such as focus groups and committees at the local and State level to highlight challenges with childcare licensing and regulations. Two Community Wellness staff will travel to the Alaska Afterschool Network Conference in October.

Community Trainings:

Community Wellness Department staff has recently received training to become facilitators of two evidencebased mental health trainings: QPR Suicide Prevention Training and Youth Mental Health First Aid (YMHFA) and will be offering trainings to the community in the coming months.

- <u>*OPR Suicide Prevention Training*</u> and was provided by the Juneau Suicide Prevention Coalition and the SeaAlaska Institute. PMC's Community Wellness Specialist is partnering with SEARHC to facilitate trainings in the community. One training was completed in September for PVFD volunteers (13 participants).
- <u>Youth Mental Health First Aid</u> training was paid for through a grant from the Petersburg Community Foundation. Two PMC Community Wellness staff completed the rigorous facilitator training in Sept-Oct. Three free YMHFA community trainings will be offered, with the first one scheduled for December 2nd. (KFSK Common Good story on YMHFA training: <u>https://www.kfsk.org/2023/10/13/the-common-good-40/</u>)
- <u>ALICE active shooter response</u> training was facilitated by Community Wellness this fall (~40 staff) and we are partnering with Petersburg Police and Petersburg School District to implement a refresher training for school staff as well in November. PMC and Police Dept. staff received training to become ALICE facilitators in 2021 and this is the second round of annual trainings offered.

Community Events:

• <u>*Pedal/Paddle Battle:*</u> Ninth annual fundraiser event for PMC Foundation. Kayaking and Biking event raised over \$20,000 to support continuing education. (*July 2023 / 79 participants*)

- <u>Camp Girls on the Run</u>: Community Wellness partnered with WAVE to offer a 5-day Girls on the Run summer camp for 3rd-5th grade girls. This was the second time the program was offered as a summer camp as opposed to an after-school program. (*August 2023 / 12 participants*)
- <u>PMC Youth Programs</u>: See attached PMC Youth Programs report for details.
- <u>Rainforest Run</u>: 10K and Half Marathon run/walk event. (Sept. 2023 / 19 participants)
- <u>Reconnect Petersburg</u>: The SHARE coalition hosted this community volunteer fair event to provide a space for information sharing and volunteer recruitment for non-profits. Community feedback was very positive and the SHARE Coalition intends to make this a biennial event. (Sept. 2023 / ~ 180 community members and 18 nonprofits participated)
- <u>Upcoming Events</u>: The Community Wellness team will host the third annual *Turkey Trot* fun run/walk and food drive on Nov. 24th, 2023. PMC will partner with SHARE Coalition members to host the *Project Connect* resource fair in January. The community *Health Fair* event is scheduled for Saturday, March 23rd with blood draws occurring in the weeks of Feb 20- March 7, 2024.

Media:

The PMC Live radio show, <u>newsletter</u>, newspaper advertisements, and Facebook posts are temporarily coordinated through Community Wellness since PMC no longer has a dedicated Public Relations position. Community Wellness staff frequently speak on the radio about their programs. The newsletter has decreased from monthly to quarterly due to limited staffing resources for this project. The website is a known area for improvement that is also a challenge to address with limited resources.

Patient Centered Care

The Community Wellness team focuses on prevention of chronic disease and behavioral health issues including substance use. Our team works to promote healthy lifestyles, preventive screenings, and health education in the community and within our staff as well as support programs and initiatives that aim to reduce risk factors and increase protective factors for youth.

- <u>Lifestyle Balance Class</u>: The year-long diabetes and heart disease prevention program uses a CDCapproved curriculum. The second year of the program began in January. The next class will begin in January 2024 (8 participants).
- <u>Health Fair:</u> Community Wellness has begun planning for the 2024 Health Fair along with Lab, Clinic, and Patient Financial Services. Blood draws will occur in Feb-March with the in-person fair planned for Saturday, March 23, 2024.
- <u>Falls Prevention</u>: A three-year grant was awarded to PMC from the Administration on Community Living to implement evidence-based falls prevention programming locally. The Community Wellness Department, Home Health, LTC, and Petersburg Parks and Rec are partnering to implement two programs – Tai Ji Quan: Moving for Better Balance and Bingocize which both began in September. Both programs are going well (Tai Ji Quan: 21 participants in-person and 7 participants virtual; Bingocize 12 participants)
- <u>Tobacco Prevention and Control:</u> PMC was awarded a three-year grant to support health systems change for tobacco cessation within PMC healthcare system including implementing and improving processes for asking about tobacco use, advising to quit, and referring to cessation resources. The first step is to complete an Organizational Assessment, to be completed by December.

Facility

The Community Wellness Department has worked with IT to procure technology equipment necessary to implement *Tai Ji Quan: Moving for Better Balance* programming virtually, as well as update some computer equipment utilizing Tobacco Prevention and Fall Prevention grants.

Item 7C.

Discussions with the Petersburg School District in August revealed increased needs for space for elementary and pre-school students. Unfortunately, this meant that they were no longer able to rent a classroom to PMC for the Kinder Skog program. Luckily, PMC was able to secure rental space at the Petersburg Lutheran Church and made a very quick transition to set up a new space there to avoid any lapse in services to families. This highlights the need for a permanent space for PMC Youth Programs. Planning a future space for PMC Youth Programs on the new hospital campus will be important to sustaining the programs, as rental space appropriate for youth programs in Petersburg is limited.

Financial Wellness

Over the past year the Community Wellness Department has shifted to being largely supported by grants to sustain current programs and continue growing the services provided in our community. Grants received are partially funding existing positions within our department as well as other departments. PMC's contracted grant writer has been incredibly helpful in writing and/or supporting our team in the writing of grants. Five of the eight grants our department has applied for this year have been awarded. Of those not awarded were two HRSA grants focused on rural healthcare that scored 95/100, showing the competitiveness of these types of grant funding.

Below is a list of grants the Community Wellness Department has recently applied for and received, independently and in coordination with other departments:

Grants Received

- <u>Administration for Community Living</u>: Three-year grant received to implement evidence-based falls prevention programming including *Tai Ji Quan: Moving for Better Balance* and *Bingocize*. Two Community Wellness positions and one Home Health position are being partially funded by this grant. (\$146,345 per year for 3 years)
- <u>Petersburg Community Foundation</u>: \$10,000 received to fund two facilitators to get certified and host Youth Mental Health First Aid training for the community. (*one year*)
- <u>AHHA Workforce Initiative</u>: Two-year funding awarded to support healthcare workforce morale, retention, wellness, and growth. Funding supports Betterhelp employee benefit and temporary summer Youth Program Mentor positions to expand youth programs (\$44,160 per year for 2 yrs)
- <u>State of Alaska Tobacco Prevention and Control</u>: Three-year grant to support health systems change for tobacco cessation within PMC healthcare system including implementing and improving processes for asking about tobacco use, advising to quit, and referring to cessation resources. This grant is partially funding two positions in Community Wellness and one in Clinic (\$145,000 per year requested for 3 yrs)

With Kinder Skog's transition from a licensed childcare program to a legally exempt recreational program, PMC is no longer able to qualify to receive State tuition assistance for low-income families, though Tribal Assistance has continued. A scholarship program was developed for eligible families in need of tuition assistance who were affected by this licensing change this summer. This scholarship program is supported completely by grants, sponsorships, and fundraising (~\$6,800 awarded in scholarships this summer). PMC plans to begin the process of applying for accreditation under the American Camps Association this winter, which would provide accreditation standards and would allow PMC to qualify to accept State and Tribal assistance from families again. This accreditation process takes approximately a year to complete.

Submitted by: Julie Walker, Community Wellness Manager

passion - awe - wonder - EVOLVE

KINDER SKOG a PMC YOUTH PROGRAMS

COMMUNITY WELLNESS PROGRAMS OF Petersburg Medical Center

OCTOBER, 2023

PRESENTED TO THE Petersburg medical center Board of directors

PREPARED BY KATIE HOLMLUND Youth Program Coordinator

SUMMARY

KINDER SKOG HISTORY KINDER SKOG HISTORY Kinder Skog was developed in 2018 as a Specialized Program under Good Beginnings/Petersburg Lutheran Church. Kinder Skog transitioned to Petersburg Medical Center in late August of 2022 and began operating as a State of Alaska licensed childcare facility. In June 2023 Kinder Skog began operating as a legally exempt from childcare licensure recreational program to meet the high demand for childcare, and after discussions with the State Childcare Program Office.

PMC + CHILDCARE HISTORY In response to the Childcare Needs Surveys and Community Cafes conducted by the SHARE Coalition PMC's Board of Directors voted in the spring of 2022 to establish a "pilot" childcare program within the Community Wellness Department. Holmlund was hired as Youth Program Coordinator in July 2022, with an agreement with Petersburg Lutheran Church to transition Kinder Skog after that summer session.

KINDER SKOG PROGRAM
INFORMATIONAges Served: youth ages 4-14 can enroll in Kinder Skog and PMC Youth Programs
Location: currently renting classrooms at the Holy Cross House (PLC)
Staff: 1 full time, 2 part time, 4 PRNs (additional staff used for summer)
Capacity: as a legally exempt program we can determine our own capacity. In the summer
we served about 40 youth per day at Kinder Skog and 13 during Forest Kindy. In the school
session we are serving up to 26 youth per day.
PMC Employee Dependents Enrolled: about 33% of Kinder Skog's enrollment are
dependents of PMC staff.

Inter PMC YouthPMC Youth Programs currently hold three separate exemptions, Kinder Skog, ORCAPROGRAMS INFORMATIONCamps, and PODs. This allows the Youth Program Coordinator to operate all the programs in specific ways to meet the needs of each program individually.

KINDER SKOG ADVISORY COMMITTEE The Kinder Skog Advisory Committee oversees the operations of the program. The committee meets quarterly, or as needed. The Kinder Skog Advisory Committee membership includes at least one representative from each of the following categories:

- Program Administrator*non-voting member*
- Financial Department
- Human Resources
- Wellness Department
- Policy Committee
- PMC Managers
- Enrolled Participant Guardian
- PMC CEO or designee
- Safety Officer

The Kinder Skog Advisory Committee will meet next in December 2023.



During the summer of 2023, PMC hosted one ORCA Camp. The theater focused camp was led by theater professional, Brad Younts with Kaili Watkins assisting during the eight-day camp which culminated in a production of the short play "Room in the Forest". 16 youth in second through eighth grade enrolled in the camp and about 50 community members showed up to enjoy their production on a sunny evening in August. Mr. Younts is hopeful to return in the summer of 2024 and expand youth theater opportunities under the ORCA Camp umbrella.



Community members line Sandy Beach to support our young thespians during the production of "Room in the Forest"



31 youth going into 3rd grade-7th grade enrolled in this summer's PODs program, an increase from last summer. The Play Outside Days (PODs) participants enjoyed Friday afternoons playing capture the flag, Zumba, hiking off island, dominating in ultimate frisbee, and enjoying "classic" summer camp style games, with a final day of an Amazing Race competition with support from various organizations/businesses in Petersburg. The program was staffed by Becky Turland, Julie Walker, Katie Holmlund, Becca Madsen, and Kaili Watkins with Noah Pawuk jumping into the action occasionally as well.



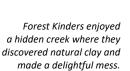
PODs participants work on the "frozen teeshirt challenge". The game was part of PODs "water challenges" day which also included slingshotting rubber ducks, a flooded boot race and other water related team games.



Summer 2023 was a pilot period for this new program which served youth ages 4-6 years old heading into kindergarten and first grade. We learned a great deal from the program:

- Overall attendance was poor. We enrolled 13 participants but averaged only 9 participants per day which made following our curriculum challenging.
- Staff for an afternoon session need to be different than the morning session staff to allow time to prepare and implement the curriculum with the greatest efficiency.
- Kids wishing to enroll in morning Skog and an afternoon session should be required to have approval from the program coordinator. Some kids just cannot do a full day with the type of programs we operate.
- 2.5 hours really was not enough time to accomplish all our goals, in part due to how tired the kids were. Everything just took longer to get through, circle time, snack, etc.

Forest Kindy was incredibly fun, and it was nice to have a smaller group to focus on building relationships and scaffolding some Skog specific skills, but if we continue the program next summer changes will need to be made to ensure success and prevent staff burnout.







The Skoggies had an incredible summer which included trips to Kupreanof, a Muddy Waters LeConte Glacier tour, fishing from shore & two chartered fishing trips, archery, Marine Science day with the crew of the Kestrel, fort building, more Uno games than one can count, a spirit week that was nothing short of spectacular, the biggest and messiest Mud Day to date, and loads of community service throughout it all. At the foundation of the program's philosophy are practicing playfulness, empathy, and demonstrating wonder and awe for the world in which we live. I have recently been reminded of how valuable these attributes are and Skog staff take great pride in role modeling, teaching, and recognizing these in youth every single day.

Thank yous: Muddy Waters Adventures (glacier), Indigenous Adventures (fishing), Dan McMahon & Kaleb Baird (archery), Petersburg Harbor Department (Kupreanof trips), PCSD (space, food service & service projects), LTC (elder visits), CCTHIA (financial support to



tribal families), Sarah Holmgrain, Erica & Jon Kludt-Painter, Bennett McGrath, and Joan Smith (sponsors), AHHA (staff funding), Elks (gratitude grant), Reids Brothers & Alaska Fibre (mud day support), ADF&G (Skog+STEM event). Summer memories happened because of the listed organizations and individuals, and we are deeply grateful for their positive impact on our program. 21 Skoggies enjoyed a trip to LeConte Glacier thanks to Muddy Waters Adventures. The kids enjoyed watching seals, eating glacial ice, and cruising in

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Safety Standards – Liability – Risk Assessment

		Safety Officer	In response to the program shift from being a state licensed to a legally exempt program, the Kinder Skog Advisory Committee appointed Josh Rathmann as the program Safety Officer. The Safety Officer and administrator shall conduct an annual review of safety plans & procedures. This review will include emergency procedures plan, risk assessment & mitigation, required safety training, incident reports & plans of correction, and review of daily safety procedures and physical space.
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ANNUAL SAFETY AUDIT Holmlund, Rathmann, and Walker meet on 10.03.2023 to review all safety related procedures, incidents from the past year, and review required trainings. Minor adjustments were made to the Emergency Procedures Plan, in addition Rathmann suggested changes to a couple of the required safety training courses for staff. These changes were implemented immediately. Overall, Rathmann seemed confident in the safety procedures and risk mitigation staff are implementing.

Incident Report Management System

Legally exempt status has allowed staff to develop more useful and appropriate incident report forms. Staff are now reporting safety and behavior incidents separately and logging all reports into a spreadsheet to monitor type of incident, location, and ratios when the incidents occur, among other data. The new management system has allowed staff to adapt how they monitor areas as well as identify areas of concern.

Financial Information

Financial Information for Aug 2022-Aug 2023	Joel and Jason will provide an overview of Kinder Skog financials for the first year of operating the program under PMC. The program has benefited from several grants as well as doubling capacity in the summer months.
Grant Funding	Petersburg Lutheran Church: \$43,500.00 AHHA: \$38,400 to support seasonal staff/increased capacity for two summers. Alaska Community Foundation: \$50,000.00 Rasmuson Foundation: \$50,000.00 Elks Gratitude Grant: \$2,500.00 to support scholarship program Alaska Childrens Trust: mini grants to support child abuse prevention education and youth mental/cultural health. CCTHIA Support Payments: \$3,600.00- rent, gear, healthy snacks, supplies
Other Sources of Funding	Sponsorships: \$3050.00 Elks Dinner Fundraiser: \$5,500.00 Pumpkin Patch: 50/50 split of proceeds with KFSK

Kinder Skog Impacts Survey

2022-2023 IMPACT SURVEY

The first year with PMC wrapped up this fall and a Kinder Skog Impact Survey was released to all families who had enrolled in Kinder Skog/Forest Kindy during the past year. The survey was released to about 75 parents/guardians to gain their perspective on program strengths and areas for growth as well as the impact Kinder Skog has on their child(ren)'s mental, physical, social, emotional health.

Preliminary results show families are incredibly satisfied with the program and are eager to see the program continue its growth. Families have highlighted how staff works <u>with</u> families and eases the burdens of parenting, how the program has improved the mental health of their children, as well as confirmed that Skoggies get more physical activity on Kinder Skog days. Families also noted how skills learned during Kinder Skog time are transferring to the classroom and their homes. Kids are more creative, knowledgeable about plants and animals, and encourage families to get outside to recreate more.



The survey is open until October 22nd, more details will be provided during the October 26th PMC Board meeting. The

Advisory Committee will take a more in-depth look at the data during their December meeting.

PMC Youth Programs Priorities

PRIORITIES FOR THE NEXT 1-3 YEARS

With support from the Petersburg Medical Center Board of Directors, PMC Youth Programs look to continue growth through program expansion, increased capacity, and diversity in enrichment programs offered. To accomplish these goals PMC Youth Programs needs a permanent home/building. Staff development is also high on the priority list which would allow more programs to operate and serve more youth. Holmlund will begin the American Camps Association Camps Accreditation process this year. ACA Accreditation could allow families to receive State Childcare Assistance again, potentially open more grant funding streams to the program and help develop staff and quality programs. Kinder



Skog has continued to grow each year since its beginning in 2018, despite never having a building to call their own, program staff look forward to continuing the momentum to best serve youth and their families.



Food & Nutrition Services (F&NS) / Dietitian Report October 2023

Workforce Wellness

Through the Wellness Department, I order snacks for the employee snack program.

As the interim manager of the Food & Nutrition Services (F&NS) Department we have had many employee updates/changes including one FT staff member on FMLA (expected return January 2024), and one FT staff member who had major medical incident causing unexpected time off and cutting-back of hours (unsure if/when they will return to full duties).

Community Engagement

In September the F&NS department provided a catering of breakfast and lunch for a 3-day event for nursing.

We put out a poster campaign in the community to recruit new employees, which has resulted in several previous employees returning to PMC and a fully staffed F&NS team.

Patient Centered Care

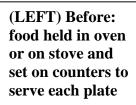
The PMC LTC and hospital menus were updated twice this summer with new menu items. The last revision was implemented in September.

On my last report I mentioned that diet accuracy has improved significantly with the implementation of traycards. This is a way to reference every patient's diet, beverages, portions, and preferences all on one card that the kitchen staff use to set up the trays. This is currently a manual process and I am happy to report that we have obtained access to a new software that will help us manage this digitally. I intend to implement this with a winter menu within the next 1-2 months.

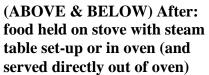
I have completed a Quality project in coordination with the IT department to improve the records sent to the kitchen. We are now receiving notifications of diets changes from Cerner to the kitchen from all levels of care (LTC, AC, and Swing). We are still trying to improve the way Cerner sends a meal-by-meal print-out.

Through QA we have implemented a Food Nutrition Service customer satisfaction survey to patients receiving meals in the hospital to help identify areas that we are doing well and areas that need improvement. The data suggests that patients are happy with the appearance and variety of the food and that areas of improvement are temperatures of the food at delivery. Since becoming manager of the F&NS department, I have started a new process of holding food hot using the wells from the old steam table. We set them up on the stove top (with water in them) and have created a make-shift steam table for each meal. Attached are pictures of how it was done before this process and how it looks now. This has greatly improved the hot food temperatures when they are plated and I expect to see the results of this in the customer satisfaction survey in the near future.











Guiding Values: Integrity - Dignity - Professionalism - Team Work - Quality

Facility

On my last report I spoke about our walk-in freezer that was having major issues holding the correct temperature. I am happy to report that the two fixes that the Maintenance team made have extended its life and it is now functioning correctly. The two fixes were fixing the latching mechanism at the door that triggers the fan to kick on/off and insulating the exterior of the "box."

My main concern at this time is the grease traps that have not been functioning properly. Cleaning the grease traps is a very physically demanding process, which is concerning. I have been working with the Maintenance manager and it was determined that both grease traps need to be replaced. We researched different options (and toured the Hammer & Wikan deli to see what they are using) and decided to go with a different company because of its ease of daily upkeep and it will be easier to do a total clean-out/emptying. One grease trap is on order now to replace the one at the sink that is the most heavily used (and causes the most problems). If that one works as expected, we will replace the other with the same product. We are still researching the best way to dispose of the wastewater when we do a full clean-out, and the Maintenance manager has reached out to a local company for disposal.

Financial Wellness

I am expecting that with full staffing in the F&NS department we will be able to reduce overtime significantly within the department.

I am developing a process to start bringing in revenue to the F&NS department in the form of providing catering to different departments (like providing breakfast and lunch for the recent nursing event in September), and offering meals to staff. My plan is to start making/offering salads to staff, then hot meals (based on the hospital/LTC menu). I have been working with the finance department to develop and plan a method to charge staff.

This month I met with our representative from our major food vendor, US Foods. He showed me how to submit credit requests for spoiled and damaged products. I have been diligently checking all our orders for accuracy and submitting credit requests as needed. So far, every order that I have placed has required credit submissions. This is normal for all healthcare kitchens but I feel PMC has a little more than other kitchens I've worked in because of the barge causing more handling and longer delivery time from warehouse to facility.

Submitted by: Jeanette Ely, RDN



Home Health Report October 2023

Workforce Wellness

The Home Team continues to be fully staffed. The clinical staff meets each morning to review caseloads, patient acuity and any immediate department needs. We also are continuing the Monday-Friday all staff meetings. This continues to improve continuity of patient care and creates cohesiveness among staff. Twice a month the therapy department joins us for case review and coordination. (IDT meetings.) These are documented in the patient electronic medical record and also have improved continuity of care. Once a month we have an all-staff meeting. Wellness and health are a priority here in Home Health. Several members continue to utilize the community center gym. Staff are encouraged to take their "wellness walks," and there is a strong focus on work/life balance. In addition to the snacks provided by the wellness team, staff members often bring in healthy light meals or treats to share with the team. We celebrate monthly birthdays as a team. Staff are encouraged to use breaktime as an opportunity to get outside.

Community Engagement

The priority of this department continues to be reaching as many community members as possible. Whether through traditional home health services, program extensions or working directly with other community agencies. Even with our patient navigator moving to a hybrid work schedule, (she will be in town on 10/30/23) she is busier than ever. We set up a workstation in the HH department and consumers can come in and work with her face-to-face via Zoom. There has been no decline or break in services during this transition. Ongoing projects include partnering with Mountain View Manor, waiver and care coordinating services, and assistance with the quality programs throughout the hospital. We have a nurse part-time in the schools as well. Also, we continue to work with the clinic on utilizing the Healthsnap remote home monitoring system. We continue to move forward slowly with the adult day program. We experienced multiple, unforeseen hurdles as we began the rollout, which slowed our progress. We have been very fortunate to partner with Petersburg Indian Association. They are renovating the building and will be creating a space specific to the adult day program. We will rent the space, and the renovations are at no cost to PMC. The Home Health team submitted a grant for senior and disability in-home services. We were awarded \$51,000. This is about 10% of the total award, and we received it without having any of these services in place. This will allow us to reach more members of the community who do not meet the criteria for HH or waiver services. We partnered with Beat the Odds and were granted money for a "voucher program" to provide housekeeping services for those who have been impacted by a cancer diagnosis. We have just about exhausted this fund. Members of the home health team continue to participate in the Share Coalition meetings. Two Home Health staff members are also members of the local EMS squad. Recently, I was invited to participate in SREC, the Southeast Regional Eldercare Coalition. This has proven to be an exceptional opportunity. The goal of the coalition is to share resources and expand opportunities for the aging population of Southeast Alaska. The caregiver café has been on hold due to summer schedules and staff location changes. We will be restarting this group in the near future. This is a support and educationally focused program for those who are the primary caregiver for someone with a chronic or progressive or dementia related illness.

We had a decent turn out to our Adult Day community forums. All but one of the surveys returned were very favorable. We appreciate the community's input and are always open to suggestions and feedback.

Patient Centered Care

The clinical staff here in Home Health continue to go above and beyond providing support and care to the patients we serve. Though we do not yet offer traditional Hospice, we continue to provide care and support to those patients under our care who are at end-of-life. The kindness and respect along with strong clinical skills

Item 7E.

offered to these patients and their families is exceptional. These are not easy cases and often require the stalT to work outside regular hours. Often the primary nurse volunteers to cover the patient until their death for continuity of care. More often, it's simply because they want to. We also recently connected with Pastor Deborah Gelerter from the Lutheran church. She provided supportive training for the HH staff. Pastor Deb has extensive experience as a Hospice chaplain. We recently utilized her talents to assist with a very difficult end-of-life case.

Facility

The home health department is fortunate to have a space that is large enough to accommodate all staff and equipment. Our conference is occasionally used by other departments as well. We are also talking with PIA about a temporary space until the renovations are done. Though we love where we are it may prove to be more cost effective and make for a smoother transition if we were to move sooner. Of note, the HH department will not have designated office space in the new hospital, instead, we plan to move our offices to the PIA building to be in closer proximity to the adult day program.

Financial Wellness

Home Health continues to have financial challenges, although the past months have shown improvement. These financial hurdles are industry wide. In fact, the HH agencies in the state of Alaska have closed in the past year. This is a result of several factors including decreased referrals, decreased reimbursement and increased acuity patient care and in-home needs. To counter this, we again obtained an MOA with the school system to provide a nurse to manage school nursing needs 20 hours each week. PMC receives a stipend for this project. Adding the adult day program will not result in a need for significant staffing increases. Instead, we will utilize the current staffing and add positions as the program grows. Our half-time school nurse will also oversee the adult day program. We will utilize our current HHA to assist in the program. All staff in home health understand that they may be asked to cover in the adult day program as needed. The HH team has had an integral part in admissions to LTC. In addition, our quality nurse is providing support to LTC and assisting in managing the quality needs within the PMC community. The patient navigator works across departments and into the community to provide support and resources. Ongoing projects include: partnering with Mountain View Manor, Waiver and care coordinating services, including the adult day program and the opportunity to provide respite care. We also have 2-3 staff participating in the Falls prevention grant programs. We are fortunate enough to have received grant funding from SDS, allowing us to expand our support to seniors in our community and possibly surrounding communities as well.

Submitted by: Kirsten Testoni, RN, WCC, Home Health Manager



Quality Report October 2023

Workforce Wellness

The interim Quality Director oversees shared initiatives led by department heads and Home Health Quality.

Community Engagement

Evidence-Based Fall Prevention Program Updates:

- Tai Ji Quan: Moving for Better Balance: The first class started on 9/12 with 21 participants. The remote class delivered on-line currently has seven participants. Technical assistance is provided for participants to take advantage of this free program from the comfort of their home. Those interested in participating can still join the remote sessions through this week at which time both classes will be closed until another one is initiated.
- Bingo-cize: The first class started on 9/25 at Parks and Recreation and has had both community members and long-term care residents participating.

PMC employee Laura Holder, RN continues to provide nursing services to PCSD. There has recently been an increase in her time spent at the district, demonstrating the vital need for these services. This is an important community role and one that bridges healthcare and education.

Patient Centered Care

The September Quality Committee meeting focused on LTC and CAH. These meetings continue to provide a stage for discovering areas to improve and document the great work PMC is doing. A list of 'action items' is maintained and updated with each meeting to ensure progress is made in resolving already identified issues. These 'action items' are issues, concerns, or processes that have been identified by the committee that provide an opportunity to improve a service, process, or patient outcome.

The approved PMC strategic plan for 2024-2028 provides a unified direction for all departments. A template has been developed to assist in connecting departmental efforts with plan objectives. The linking of identified key performance indicators will allow for the tracking of progress towards one-, three-, and five-year goals. Quality staff and managers will be working towards the identification and use of KPIs aligned with the strategic plan under the direction of the interim Quality Director and the Quality Committee.

Facility

PMC Long Term Care was awarded the Excellence in Quality Award from Mountain Pacific. This achievement clearly demonstrates the high standards to which LTC leadership and staff hold themselves. Their dedication and diligence in improving the lives of long term care residents is remarkable.

Financial Wellness

Policies and procedures have been developed for the Senior In-Home services program and for utilization of the recently awarded grant of \$50K. They aim to define the scope of services and provide a framework for administering and monitoring these services. The goal of these programs is to enhance the quality of life for seniors while promoting their independence and well-being.

Submitted by: Stephanie Romine, RN



Infection Control and Prevention Report October 2023

Workforce Wellness

There have been no changes in staffing.

Community Engagement

Influenza and Covid boosters are available and have been offered to LTC residents and hospital patients. Influenza vaccines are available at the clinic, hospital, home health, and public health. State supplied covid vaccines are available only to people who have insurance other than Medicare only, Medicaid only or Medicare and Medicaid. PMC "floor stock" vaccines are available for people with Medicare and/or Medicaid only through the clinic. The clinic is awaiting delivery of the new RSV vaccine and infant RSV immunization.

Patient Centered Care

2023 Hand Hygiene Compliance: (rate determined by secret direct observation during the WHO's Five Moments of Hand Hygiene)

LTC: 70% Acute Care: 77%

LTC September 2023 Metrics:

Urinary Tract Infections (UTI): 0 Catheter associated Urinary Tract Infections (CAUTI): 0 Clostridium Difficile infections: 0 Covid-19 infections: 0 LTC Resident Flu Shots: All residents offered vaccines, 80% accepted. LTC Covid Vaccine 2023-2024 booster: All residents offered vaccines, 60% accepted.

Facility

The LTC solarium renovation is nearly complete, and residents will once again be able to enjoy its use.

Financial Wellness

No changes have occurred in this area.

Submitted by: Jennifer Bryner, MSN, RN



CEO Board Report October 2023

<u>Mission Statement:</u> Excellence in healthcare services and the promotion of wellness in our community. <u>Guiding Values:</u> Dignity, Integrity, Professionalism, Teamwork, Quality

Highlights:

- PMC received official approval from the State Governors Office of the \$20M Department of Treasury Award that will fund the WERC building. This building is the first phase of the replacement hospital buildings. PMC still needs an estimated \$37M for the core and shell of the main hospital building for phase 2 funding and \$31M for phase 3 to complete the funding stack interior fit-out, direct and soft costs for "turn key" facility.
- PMC's Long Term Care was awarded a Gold Pan award for Excellence in Nursing Home care during the recent Alaska Hospital and Healthcare Association conference. Jennifer Bryner and Phil Hofstetter accepted the award on behalf of the PMC team (right).
- Welcome new board member Mika Hasbrouck. This will be Mika's first term on the hospital board. Board president Jerod Cook and board secretary Marlene Cushing were re-elected.
- PMC is working on implementing the HRSA grant award for Rural Communities Opioid Response program which will be a part of the Behavioral Health department. This is a one



year \$300k grant. Additionally, PMC has growing concerns regarding the rising instances of fentanyl use and potential abuse in our community. We held a preliminary meeting on September 28 with EMS, PHN and law enforcement to gain a clearer understanding of the situation at the community level.

- PMC participated in a table tope LTC evacuation drill on 10/17/2023 as part of the request from the LTC resident council following the smoke impact to LTC during fire at the Catholic Church earlier this summer.
- PMC participated in the statewide earthquake drill called the Great Alaskan Shakeout on October 19. As part of the drill, PMC staff practiced the "Drop, Cover, and Hold" part of earthquake procedures as well as running through our communication plan.

<u>Financial Wellness:</u> <u>Goal:</u> To achieve financial stability and sustainability for the hospital.

<u>FY23 Benchmarks for Key Performance Indicators (KPIs)</u>: Gross A/R days to be less than 55, DNFB < then 5 days, and 90 Days Cash on Hand

- FY23 Audit is currently in process and the audit firm expects to complete this process in October.
- FY24 capital budget continues to be reviewed and will have a more concise list for approval.
- PMC received information that the State denied the specific Exceptional Relief Request; however, they have allowed PMC to rebase with increased allowable costs for FY24 data.
- Financial performance is improving very slowly and will be reported out accordingly.

<u>New Facility:</u> Goal: To expand the capacity and capabilities of the community borough-owned rural hospital through the construction of a new facility, while taking into account the needs and priorities of the local community.

- The final repair to the considerable water damage with mold on the floor and walls in the PMC long term care solarium are almost complete. This area should reopen by the time of the board meeting.
- 35% of the design on the Wellness, education, resource center (WERC) as part of the new facility is submitted for approval. Final design should be expected by the Architects & Engineers at the end of the month to put forward to the steering committee for approval.



• Updates: Project updates are available on the PMC website under the "New Facility & Planning" tab: <u>https://www.pmcak.org/new-facility.html</u>.

Workforce Wellness: Goal: To create a supportive work environment and promote the physical and mental well-being of hospital staff, in order to improve retention rates and overall productivity.

• The annual department managers retreat is scheduled for October 25. This day-long retreat focuses on revisiting the strategic plan and brainstorming sessions.



- The first CEO Office Hours open door availability to staff was held on 10/19/2023. This will be dedicated hours for open door to all staff on a monthly basis.
- Medical and nursing staff went to critical care training in Anchorage for a higher level certification (left).

<u>Community Engagement:</u> Goal: To strengthen the hospital's relationship with the local community and promote health and wellness within the community.

- PMC third quarter newsletter
- October 5: PMC reports out at Borough Assembly Meeting
- October 9: KFSK Radio PMC Live
- October 19: PMC reports out at PIA Council Meeting.
- Townhall meeting open house is anticipated to be in November to discuss

the design of the WERC building and latest developments with the facility.

<u>Patient-Centered Care and Wellness:</u> Goal: To provide high-quality, patient-centered care and promote wellness for all patients.

- We are thrilled to share that the inaugural colonoscopy clinic, a collaboration between PMC and the SEARHC scope team, took place in the last week of September. This highly sought-after service was at capacity, and preparations for the next clinic are underway. Additionally, the PMC and SEARHC scope team is offering endoscopy services, with another clinic on the horizon.
- In October, Specialty Clinic introduces dermatology services, encompassing skin checks, removals of moles, lipomas and skin cancer; treatment of chronic skin conditions like psoriasis, acne and dermatitis; and cosmetic Botox procedures.
- On October 11, Dr. Erik Woelber, orthopedic specialist from Juneau Bone and Joint, visited PMC to assess specialty clinic and potentially providing the service to Petersburg.
- We are finalizing our contract with psychiatry to launch our telepysch opioid overdose HRSA grant program.
- Transitional care, case coordination, complex case management and home monitoring are just a few examples of projects occurring in Primary Care.
- Home Health has continued the staffing assistance for the nursing contract at the school and Behavioral health has also continued with school mental health contract.

2023 Quarter 3 COMMUNITY NEWELETTER 2023 Quarter 3 COMMUNITY NEWELETTER 2023 Quarter 3 COMMUNITY NEWELETTER 2023 Quarter 3 COMMUNITY NEWELETTER

Petersburg Medical Center Newsletter



 Mole, liporna, and skin cancer removals
 Psoriasis, acne, atopic

NOW SCHEDULING

- dermatitis, and skin abnormalities • Cosmetic Botox
- 907-772-5792 for scheduling

Submitted by: Phil Hofstetter, CEO

FINANCIAL REPORTING PACKAGE

FISCAL YEAR 2024

For the month ended September 30, 2023

Statement of Revenues and Expenses

For the month ended September 30, 2023

								F	Y24		
Month	Month	\$	%			YTD	YTD	\$	%	Prior	%
Actual	Budget	Variance	Variance			Actual	Budget	Variance	Variance	YTD	Variance
					Gross Patient Revenue:						
\$235,081	223,191	\$11,890	5.3%	1.	Inpatient	\$937,303	\$614,932	\$322,371	52.4%	\$517,954	81.0%
1,290,287	1,380,000	(89,713)	-6.5%	2.	Outpatient	4,299,168	5,008,581	(709,413)	-14.2%	4,218,701	1.9%
522,905 2,048,274	492,974 2,096,165	29,931 (47,891)	<u> </u>	3. 4.	Long-term Care Total gross patient revenue	<u>1,524,649</u> 6,761,120	492,974	1,031,675 644,633	209.3%	<u>1,219,904</u> 5,956,559	25.0% 13.5%
2,040,274	2,090,105	(47,091)	-2.3%	4.	Total gross patient revenue	0,701,120	6,116,487	044,033	10.5%	5,956,559	13.3%
					Deductions from Revenue:						
324,893	428,633	103,740	24.2%	5.	Contractual adjustments	1,796,796	1,080,420	(716,376)	-66.3%	1,025,758	-75.2%
0	0	0	n/a	6.	Prior year settlements	0	0	0	n/a	-	n/a
(188,313)	92,880	281,193	302.7%	7.	Bad debt expense	(489,263)	111,942	601,205	537.1%	94,289	-618.9%
112	94,583	94,472	99.9%	8.	Charity and other deductions	22,965	283,966	261,001	91.9%	123,456	81.4%
136,692	616,096	479,404	77.8%	9.	Total deductions from revenue	1,330,498	1,476,328	145,830	9.9%	1,243,503	-7.0%
1,911,582	1,480,069	431,513	29.2%	10.	Net patient revenue	5,430,622	4,640,159	790,463	17.0%	4,713,056	15.2%
						i	· · · · · · · · · · · · · · · · · · ·	·			· · · · · ·
		(4.000)			Other Revenue					-	
82,508	83,836 61,960	(1,328)	-1.6%	11.		248,218	241,791 32,970	6,427	2.7%	233,046	6.5%
44,858 0	01,960	(17,102) 0	-27.6% n/a	12. 13.	Grant revenue Federal & State Relief	121,361 0	32,970	88,391 0	268.1% n/a	35,697	240.0% n/a
27,706	29,167	(1,461)	-5.0%	13.	Other revenue	93,582	5,440	88,142	1620.3%	19,698	375.1%
155,073	174,963	(19,890)	-11.4%	15.	Total other operating revenue	463,162	280,201	182,961	65.3%	288,441	60.6%
·								·		· · · · · · · · · · · · · · · · · · ·	. <u> </u>
2,066,654	1,655,032	411,622	24.9%	16.	Total operating revenue	5,893,784	4,920,360	973,424	19.8%	5,001,497	17.8%
					C						
939,921	1,023,076	83,155	8.1%	17.	Expenses: Salaries and wages	2,902,885	3,181,407	278,522	8.8%	3,041,198	4.5%
84,750	68,693	(16,057)	-23.4%	17.	Contract labor	193,939	172,894	(21,045)	-12.2%	164,661	-17.8%
344,680	370,953	26,273	7.1%	19.	Employee benefits	1,088,363	1,077,902	(10,461)	-1.0%	1,016,470	-7.1%
139,028	147,411	8,383	5.7%	20.	Supplies	380,682	530,362	149,680	28.2%	491,076	22.5%
113,543	146,849	33,306	22.7%	21.	Purchased services	343,707	427,088	83,381	19.5%	406,750	15.5%
74,417	50,798	(23,619)	-46.5%	22.	Repairs and maintenance	153,467	167,524	14,057	8.4%	159,547	3.8%
23,431	14,467	(8,964) 2,966	-62.0% 13.6%	23. 24.	Minor equipment	73,515 60,832	45,373 55,648	(28,142)	-62.0% -9.3%	43,213 54,027	-70.1% -12.6%
18,885 83,355	21,851 93,206	2,966 9,851	10.6%	24. 25.	Rentals and leases Utilities	255,052	266,687	(5,184) 11,635	-9.3% 4.4%	265,360	-12.6%
14,234	12,203	(2,031)	-16.6%	25. 26.	Training and travel	233,032	36,609	9,229	25.2%	23,876	-14.7%
91,366	88,976	(2,390)	-2.7%	27.	Depreciation	277,968	266,929	(11,039)	-4.1%	301,023	7.7%
15,770	16,419	649	3.9%	28.	Insurance	49,648	47,916	(1,732)	-3.6%	43,560	-14.0%
27,736	33,195	5,459	16.4%	29.	Other operating expense	89,651	99,828	10,177	10.2%	94,409	5.0%
1,971,114	2,088,097	116,983	5.6%	30.	Total expenses	5,897,090	6,376,167	479,077	7.5%	6,105,170	3.4%
95,540	(433,065)	528,605	122.1%	31.	Income (loss) from operations	(3,306)	(1,455,807)	1,452,500	99.8%	(1,103,673)	99.7%
					Neneroreting Coincil coord)						
(405.000)	0.000	(400,000)	4000 70/		Nonoperating Gains(Losses):	(00,500)	(50.044)	(05, 400)	04 40/	(457 500)	40.00/
(125,300)	8,333	(133,633)	-1603.7%	32.	Investment income	(93,530)	(58,041)	(35,489)	61.1%	(157,522)	-40.6%
(12,094)	(4,167) 0	(7,927) 0	-190.2%	33. 24	Interest expense	(36,228)	(8,812) 0	(27,416) 0	-311.1%	(41,197)	12.1%
462,487	834	461,653	n/a 55354.1%	34. 35.	Gain (loss) on disposal of assets Other non-operating revenue	778,477	5,861	772,616	n/a 13182.3%	- (111,687)	n/a -797.0%
325,094	5,000	320,094	6401.9%	35. 36.	Net nonoperating gains (losses)	648,719	(60,992)	709,711	-1163.6%	(310,406)	309.0%
020,004	3,000	020,004	01.370	50.	ter nonoperating gains (103553)	040,713	(00,332)	103,111	1100.070	(010,+00)	000.070
\$420,633	(\$428,065)	\$848,698	-198.3%	37.	Change in Net Position (Bottom Line)	\$645,413	(\$1,516,799)	\$2,162,211	-142.6%	(\$1,414,079)	145.6%
					,			<u> </u>			

Balance Sheet

September, 2023

ASSETS				
	Sept 2023	Aug <u>2023</u>	June 2023	Sept 2022
Current Assets:				
1. Cash - operating	\$491,961	\$611,482	\$422,951	\$516,604
2. Cash - insurance advances	0	0	0	473,395
3. Investments	47,275	47,244	47,174	2,003,930
4. Total cash	539,236	658,725	470,125	2,993,929
5. Patient receivables	5,219,064	5,306,177	6,030,712	5,908,367
6. Allowance for contractuals & bad debt	(1,563,356)	(1,794,294)	(2,891,731)	(2,875,225)
7. Net patient receivables	3,655,708	3,511,883	3,138,980	3,033,142
8. Other receivables	918,852	666,900	938,719	44,750
9. Inventories	303,968	298,799	317,650	408,729
10. Prepaid expenses	252,042	281,344	113,382	321,901
11. Total current assets	5,669,806	5,417,651	4,978,857	6,802,451
Property and Equipment:				
12. Assets in service	28,082,848	28,061,691	28,056,475	28,240,687
13. Assets in progress	1,982,546	1,535,883	1,322,767	137,131
14. Total property and equipment	30,065,394	29,597,574	29,379,242	28,377,818
15. Less: accumulated depreciation	(21,430,977)	(21,339,611)	(21,153,009)	(20,325,453)
16. Net propery and equipment	8,634,417	8,257,963	8,226,233	8,052,365
Assets Limited as to Use by Board				
17. Investments	2,923,461	3,025,395	3,008,055	2,631,362
18. Building fund	632,936	654,284	649,250	566,629
19. Total Assets Limited as to Use	3,556,397	3,679,679	3,657,306	3,197,991
Pension Assets:				
20. OPEB Asset	8,781,677	8,781,677	8,781,677	8,781,677
Deferred Outflows:				
21. Pension	2,756,254	2,756,254	2,756,254	2,756,254
22. Total assets	\$29,398,551	\$28,893,224	\$28,400,326	\$29,590,738

LIAI	BILITIES & FUND BALANCE	I	FY24		
		Sept 2023	Aug 2023	June 2023	Sept 2022
	rent Liabilities:	¢1.017.614	¢1 542 221	01 754 004	¢1.00<070
23.	Accounts payable	\$1,817,614	\$1,543,331	\$1,756,006	\$1,896,373
24.	Accrued payroll	477,831	373,029	187,957	410,963
25.	Payroll taxes and other payables	216,643	205,561	235,857	325,565
26.	Accrued PTO and extended sick	999,523	1,076,606	1,069,103	1,081,592
27.	Deferred revenue	147,969	174,337	206,868	420,267
28.	Due to Medicare	270,730	365,055	99,999	1,092,757
29.	Due to Medicare - Advance	0	0	0	473,395
30.	Due to Blue Cross - Advance	0	0	0	0
31.	Other current liabilities	3,069	3,069	3,069	3,515
32.	Loan Payable - SBA	0	0	0	0
33.	Current portion of long-term debt	352,099	350,606	347,641	370,631
34.	Total current liabilities	4,285,478	4,091,594	3,906,501	6,075,058
Long	g-Term Debt:				
35.	Capital leases payable	2,346,047	2,376,080	2,435,762	2,652,857
Pens	ion Liabilities:				
36.	Net Pension Liability	12,053,763	12,053,763	12,053,763	12,053,763
37.	OPEB Liablity	-			
38.	Total pension liabilities	12,053,763	12,053,763	12,053,763	12,053,763
39.	Total liabilities	18,685,288	18,521,437	18,396,026	20,781,678
	_				
-	rred Inflows:				
40.	Pension	9,613,036	9,613,036	9,613,036	9,613,036
	Position:				
41.	Unrestricted	1,100,228	758,750	391,263	610,104
42.	Current year net income (loss)	0	0	0	(1,414,079)
43.	Total net position	1,100,227	758,750	391,263	(803,976)

**Note: Cash on line 1 is for presenation purposes only. The total

	0
PETERSBURG MEDICAL CENTER	
Statement of Revenues and Expenses	
FISCAL YEAR 2024	

		July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Мау	June	Total	Prior YTD	% VAR
	Gross Patient Revenue:															
1.	Inpatient	420,582	281,640	235,081	-	-	-	-	-	-	-	-	-	937,303	517,954	81.0%
2.	Outpatient Long-term Care	1,357,994 488,932	1,650,887 512,812	1,290,287 522,905	-	-	-	-	-	-	-	-	-	4,299,168 1,524,649	4,218,701 1,219,904	1.9% 25.0%
3. 4.	Total gross patient revenue	2,267,508	2,445,339	2,048,274		-	-	-		-		-	-	6,761,120	5,956,559	13.5%
4.	Total gross patient revenue	2,207,300	2,440,000	2,040,274			-	_			-	-		0,701,120	3,330,333	10.070
	Deductions from Revenue:															
5.	Contractual adjustments	859,152	612,751	324,893	-	-	-	-	-	-	-	-	-	1,796,796	1,025,758	-75.2%
6.	Prior year settlements	-	-	-	-	-	-	-	-	-	-	-	-	-	-	n/a
7.	Bad debt expense	(298,912)	(2,038)	(188,313)	-	-	-	-	-	-	-	-	-	(489,263)	94,289	618.9%
8.	Charity and other deductions	22,881	(28)	112	-	-	-	-	-	-	-	-	-	22,965	123,456	81.4%
9.	Total deductions from revenue	583,121	610,685	136,692	-	-	-	-	-	-	-	-	-	1,330,498	1,243,503	-7.0%
10.	Net patient revenue	1,684,387	1,834,654	1,911,582	-	-	-	-	-	-	-	-	-	5,430,622	4,713,056	15.2%
Other Revenue																
11.	Inkind Service - PERS/USAC	82.852	82,858	82,508	-	-	-	-	-	-	-	-	-	248,218	233,046	6.5%
12.	Grant revenue	31,175	45,328	44,858	-	-	-	-	-	-	-	-	-	121,361	35,697	240.0%
13.	Federal & State Relief	-	-	-	-	-	-	-	-	-	-	-	-	-	-	n/a
14.	Other revenue	33,387	32,489	27,706	-	-	-	-	-	-	-	-	-	93,582	19,698	375.1%
15.	Total other operating revenue	147,414	160,675	155,073	-	-	-	-	-	-	-	-	-	463,162	288,441	60.6%
					-	-	-	-	-	-	-	-	-			
16.	Total operating revenue	1,831,801	1,995,328	2,066,654	-	-	-	-	-	-	-	-	-	5,893,784	5,001,497	17.8%
	Expenses:													-		
17.	Salaries and wages	944,787	1,018,177	939,921	_		_	-	_		_	-	-	2,902,885	3,041,198	4.5%
17.	Contract labor	44,956	64,233	84,750	-	-	-	-	-	-	-	-	-	193,939	164,661	-17.8%
19.	Employee benefits	372,837	370,846	344,680	-	-	-	-	-	-	-	-	-	1,088,363	1,016,470	-7.1%
20.	Supplies	137,326	104,328	139,028	-	-	-	-	-	-	-	-	-	380,682	491,076	22.5%
21.	Purchased services	99,202	130,963	113,543	-	-	-	-	-	-	-	-	-	343,707	406,750	15.5%
22.	Repairs and maintenance	31,756	47,295	74,417	-	-	-	-	-	-	-	-	-	153,467	159,547	3.8%
23.	Minor equipment	18,600	31,485	23,431	-	-	-	-	-	-	-	-	-	73,515	43,213	-70.1%
24.	Rentals and leases	20,604	21,343	18,885	-	-	-	-	-	-	-	-	-	60,832	54,027	-12.6%
25.	Utilities	85,388	86,310	83,355	-	-	-	-	-	-	-	-	-	255,052	265,360	3.9%
26.	Training and travel	(367)	13,513	14,234	-	-	-	-	-	-	-	-	-	27,380	23,876	-14.7%
27.	Depreciation	93,305	93,297	91,366	-	-	-	-	-	-	-	-	-	277,968	301,023	7.7%
28.	Insurance	18,556	15,321	15,770	-	-	-	-	-	-	-	-	-	49,648	43,560	-14.0%
29.	Other operating expense	24,668	37,247	27,736	-	-	-	-	-	-	-	-	-	89,651	94,409	5.0%
30.	Total expenses	1,891,619	2,034,357	1,971,114	-	-	-	-	-	-	-	-	-	5,897,090	6,105,170	3.4%
31.	Income (loss) from operations	(59,818)	(39,028)	95,540	-	-	-	-	-	-	-	-	-	(3,306)	(1,103,673)	99.7%
	Nonoperating Gains(Losses):															
32.	Investment income	94,884	(63,115)	(125,300)	_		_	_	-		_	-	-	(93,530)	(157,522)	-40.6%
32.	Interest expense	(12,096)	(12,038)	(12,094)		-	-	-	-				-	(36,228)	(41,197)	12.1%
33. 34.	Gain (loss) on disposal of assets	(12,090)	(12,030)	(12,034)		-	-	-	-				-	(30,220)	(41,157)	12.170
34.	Other non-operating revenue	(24,536)	340,527	462,487	-	-	-	-	-				-	778,477	(111,687)	-797.0%
35. 36.	Net nonoperating gains (losses)	58,252	265,374	325,094		-	-	-					-	648,719	(310,406)	-309.0%
30.	Net nonoperating gains (105585)	50,252	200,074	323,034	-	-	-	-	-	-	-	-	-	040,713	(310,400)	-303.0 /0
37.	Change in Net Position (Bottom Line)	(1,566)	226,345	420,633	-	-	-	-	-	-	-	-	-	645,413	(1,414,079)	-145.6%
38.	FY23 Budget	28,680	58,036	(464,391)	(23,882)	93,538	(13,631)	27,810	(1,970)	344,809	421,123	28,913	28,913	527,946	-	
39.	FY23 Variance	(30,246)	168,310	885,025	23,882	(93,538)	13,631	(27,810)	1,970	(344,809)	(421,123)	(28,913)	(28,913)	117,466	-	

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Item 7H.

Item 7H.

PETERSBURG MEDICAL CENTER	
Key Volume Indicators	
FISCAL YEAR 2024	

	July	Aug	Sept	Oct	Νον	Dec	Jan	Feb	Mar	Apr	Мау	June	Total	Prior YTD	% Change
Hospital Inpatient															
1. Patient Days - Acute Care	32	32	26										90	66	36.4%
2. Patient Days - Swing Bed	46	31	26										103	79	30.4%
3. Patient Days - Total	78	63	52										193	145	33.1%
4. Average Daily Census - Acute Care	1.0	1.0	0.9										0.4	0.7	-48.4%
5. Average Daily Census - Swing Bed	1.5	1.0	0.9										0.4	0.9	-50.6%
6. Average Daily Census - Total	2.5	2.0	1.7										0.8	1.6	-49.6%
7. Percentage of Occupancy	21.0%	16.9%	14.4%										6.6%	13.1%	-49.6%
Long Term Care															
8. Resident Days	403	410	420										1,233	1,104	11.7%
 Average Daily Census 	13.0	13.2	14.0										5.1	12.0	-57.7%
10. Percentage of Occupancy	86.7%	88.2%	93.3%										33.8%	80.0%	-57.7%
Other Services															
11. Emergency Room Visits	92	102	81										275	198	38.9%
12. Radiology Procedures	206	189	199										594	616	-3.6%
13. Lab Tests (excluding QC)	1,891	1,959	1,581										5,431	5,425	0.1%
14. Rehab Services Units	1,043	1,071	768										2,882	2,927	-1.5%
15. Home Health Visits	212	152	118										482	726	-33.6%
16. Clinic Visits	** 794	821	729										2,344	1,976	18.6%

** Stats under review

Key Operational Indicators

For the month ended September 30, 2023

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Мау	June	YTD	Prior YTD	% Change
1. Contractual Adj. as a % of Gross Revenue	37.9%	25.1%	15.9%										26.6%	17.2%	-54.3%
2. Charity/Other Ded. as a % of Gross Revenue	1.0%	0.0%	0.0%										0.3%	2.1%	83.6%
3. Bad Debt as a % of Gross Revenue	-13.2%	-0.1%	-9.2%										-7.2%	1.6%	-557.1%
4. Operating Margin	-3.3%	-2.0%	4.6%										-0.1%	-22.1%	99.7%
5. Total Margin	-0.1%	10.0%	17.6%										9.9%	-30.1%	132.7%
6. Days Cash on Hand (Including Investments)	79.7	74.8	69.7	-	-	-	-	-	-	-	-	-	61.3	104.3	-41.3%
7. Days in A/R	58.5	62.8	61.9	-	-	-	-	-	-	-	-	-	61.9	59.2	-4.6%

Draft Update 19-October 23

Petersburg Medical Center (PMC) has provided medical services to the community of Petersburg for more than 100 years. The hospital was originally built in 1955 and became a federally designated Critical Access Hospital in 2001. PMC is a vital part of the community, providing critical medical services to all residents of the region, as well as supporting seasonal fishing and cannery workers.

PMC employment is a significant part of the local economic engine. 97% of employees and 100% of the medical staff live in Petersburg, injecting \$11-\$12 million per year in salaries into the local economy. According to the Alaska Hospital & Healthcare Association 2022 Workforce Analysis, healthcare has become the most important economic sector in the state, driving growth in other industries. Petersburg Borough has listed PMC as their top priority for capital projects.

PMC's building is outdated, inefficient, and past its useful life. Petersburg needs a modern, efficient healthcare facility that will enhance patient privacy, provide greater accessibility, and ensure the availability of critical services that support our residents here at home.

The new medical center will be located on a 12-acre parcel east of 9th Street between Haugen Drive and Excel Street. There will be two separate buildings: a 19,000-square-foot Wellness, Education & Resource Center (WERC) that will house Public Health Nursing, an MRI suite, conference/training rooms, a public internet center, and other support space; and the main 59,000-square-foot hospital building. The main hospital will include 12 acute care beds; 16 long-termcare beds; an Emergency Room; Primary Care Clinic; Physical Therapy; and ancillary support services such as Lab, Imaging, and Pharmacy.

Key Improvements Planned

Item 9B.

- Meeting the most current regulations and best practices for healthcare delivery
- Fully-accessible building and site, including parking, entrances, and covered dropoffs.
- Enhanced privacy for treatment, ER, and registration
- Private rooms for Long Term Care and Acute Care
- Layout that maximizes staffing efficiency to maintain current staffing levels and provide opportunities for expanded services
- Energy-efficient design for long-term utility cost savings
- Welcoming and functional spaces for training, education, and community events-large meeting rooms, plus activity and dining spaces in Long Term Care
- Site connections to existing trails and nature



PROGRESS TO DATE

November 2015:	Building condition assessment survey
January 2020:	Master plan completed, including site options assigned by Borough
May 2021:	Borough Resolution 2021-04 donates land, supports phased construction and getting the project shovel ready
May 2022:	North Haugen and Excel sites selected for further study
September 2022:	Site due diligence studies; Bettisworth North selected as project architect
January 2023:	Preliminary design completed
February 2023:	Borough Motion making the project their #1 priority for federal funding
April 2023:	Borough Resolution 2023- 04 approves North Haugen site, start of rezone/replat, and the Dawson contract for pre-construction services; final geotechnical investigation
August 2023:	USACE 404 permit issued
September 2023:	Final Plat approved

October 2023: NEPA clearance

SITE PLAN



